

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET						SERIAL NO. <u>10614475</u>	FILING DATE						
						APPLICANT(S)							
<u>6-5-06</u>						<u>6-5-06</u>							
CLAIMS													
AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT		NO		DEF		NO		DEF	
NO	DEF	NO	DEF	NO	DEF	NO	DEF	NO	DEF	NO	DEF	NO	DEF
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TOTAL NO.						2		2					
TOTAL DEF.						15		16					
TOTAL CLAIMS						17		18					